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Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Coldinii 1)		(Coldinii 2)					OR		
TOTAL GLAING			11				RA		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			∮ ∮ minus 20=		* 0		X\$	9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		6		X42	2=	-	OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		<u></u>		+14	0=	_	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in co						olumn 2	тот	AL	570	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	, ,	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$!	9=		OR	X\$18=	
	Independent	*	Minus	***	F.O. A.114	=	X42	!=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		+140)=		OR	+280=	
								TAL		OR	TOTAL ADDIT. FEE	
		ADDIT.	ree (,	ADDII. FEE						
	ker en 't beste	(Column 1) CLAIMS		(Colur HIGH	IEST	(Column 3)			ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RAT	Έ	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42	?=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+280=	
)=		OR		
								TAL FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=	
	Independent	*	Minus	***		=-	X42	<u> </u>		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	If the "Highest Nu	mber Previously P	aid For" IN TH	IS SPACE	is less tha	n 20, enter "20."	TC ADDIT.	TAL FFF		OR	TOTAL ADDIT. FEE	
**		ımber Previously P nber Previously Pa							propriate bo	- x in co		,



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Under the Panerwork Reduction Act of 1995, no persons are required to respond to Application or Docker Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) FOR NUMBER FILED NUMBER EXTRA **RATE RATE** FEE FEE BASIC FEE _{\$} 370 OR \$ (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = OR (37 CFR 1.16(b)) (37 CFR 1.16(d)) MULTIPLE DEPENDENT CLAIM PRESENT OR 370 TOTAL OR * If the difference in column 1 is less then zero, enter "0" in column 2 TOTAL OTHER THAN CLAIMS AS AMENDED - PART II OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL RATE TIONAL **AMENDMENT AFTER** PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR Total OR Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR (Column 1) ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) = Minus OR *** Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **PRESENT** NUMBER RATE TIONAL TIONAL RATE **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) Minus = ς\$ OR Independent Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT, FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trudemark Officer, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.